

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W.A.		04/09/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H2	5C-916	01-27-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	9/03 5/04
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26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	00
39	00
40	✓
41	✓
42	✓
43	00
44	✓
45	✓
46	✓
47	✓
48	✓
49	00
50	00

Claim	Date
Final Original	5/04
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52	0
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Claim	Date
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NOT AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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